June 29, 1999

Dickson

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First Named Inventor

PATENT - POWER OF ATTORNEY

OR

REVOCATION OF POWER OF ATTORNEY WITH A NEW DOMED OF ATTORNEY

| AND                                                                                                                                                                                                                                                                                                    | Title                | Light-Tube Running Board Lighting     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------|
| CHANGE OF CORRESPONDENCE ADDRESS                                                                                                                                                                                                                                                                       | Attorney Docket Numb | er 104315-00060                       |
|                                                                                                                                                                                                                                                                                                        |                      |                                       |
| I hereby revoke all previous powers of attorney given in the above-identified patent.  A Power of Attorney is submitted berswith                                                                                                                                                                       |                      |                                       |
| A Power of Attorney is submitted herewith.  OR                                                                                                                                                                                                                                                         |                      |                                       |
| I hereby appoint Practitioner(s) associated with the following Customer Number as mylour attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:                                       |                      |                                       |
| I hereby appoint Practitioner(s) named below as my/o above, and to transact all business in the United State                                                                                                                                                                                           |                      |                                       |
| Practitioner(s) Name                                                                                                                                                                                                                                                                                   | F                    | Registration Number                   |
|                                                                                                                                                                                                                                                                                                        |                      |                                       |
|                                                                                                                                                                                                                                                                                                        |                      |                                       |
|                                                                                                                                                                                                                                                                                                        |                      |                                       |
| The address associated with the above-mentioned Custome OR  The address associated with Customer Number:  OR  Influvidual Name Address  City  Country  Telephone  I am the:  Inventor, having ownership of the patent.  OR  All Palent owner Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted | State  <br>  Email   | Zip                                   |
| Signature Signature Usa Boulton                                                                                                                                                                                                                                                                        | Da                   | te 0000 16 13<br>lephone 416-431-8721 |
| Title and Company General Counsel. Tiercon Corp.  NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one                                                                                        |                      |                                       |
| signature is required, see below*  Total of 1 forms are submitted.                                                                                                                                                                                                                                     |                      |                                       |

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